

AMENDMENT TRANSMITTAL LETTER			Docket No. SPINE 3.0-437 CIPCIPCIPCIPCIPCON I
Application No. 10/784,646-Conf. #8184	Filing Date February 23, 2004	Examiner B. E. Pellegrino	Art Unit 3738

Applicant(s): Joseph P. Errico, Michael W. Dudasik, and Rafail Zubok

Invention: ARTIFICIAL INTERVERTEBRAL DISC TRIAL HAVING A CONTROLLABLY SEPARABLE DISTAL END

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	20	- 21 =	0	x 52.00	0.00
Independent Claims	2	- 3 =	0	x 220.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

- ☒ Large Entity ☐ Small Entity
- ☒ No additional fee is required for this amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of \$ _____.
- ☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 12-1095 as described below. A duplicate copy of this sheet is enclosed.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

/William A. Di Bianca/
William A. Di Bianca
Attorney/Agent Reg. No.: 58,653

Dated: March 19, 2009

LERNER, DAVID, LITTENBERG, KRUMHOLZ & MENTLIK, LLP
600 South Avenue West
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(908) 654-5000

Adjustment date: 04/22/2009 CKHLUK
03/20/2009 INTLSW 00000407 121095
01 FC:1454 1410.00 CR

10784646

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: March 19, 2009

Electronic Signature for William A. Di Bianca: /William A. Di Bianca/

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 4-11-09

2 Serial/Patent # 10/784646

3 Please refund the following fee(s):

4 PAPER
NUMBER

5 DATE
FILED

6 AMOUNT

Filing

\$

Amendment

\$

Extension of Time

\$

Notice of Appeal/Appeal

\$

Petition

\$

Issue

\$

Cert of Correction/Terminal Disc.

\$

Maintenance

\$

Assignment

\$

Other

\$

7 TOTAL AMOUNT
OF REFUND

\$ 1,410.00

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

9 12--1095

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

Not necessary.

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: Karen Creasy

TITLE: Petitions Examiner

SIGNATURE: /Karen Creasy/

PHONE: 2-3208

OFFICE: Petitions

THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: CKK

DATE: 4/22/09

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: